SECURITIES A W SECURITIES A W NOTICE PURSUA

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

ÜNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB NUMBER: 3235-0076
Expires: April 30, 2008
Estimated average burden
kours per response..................16.00

SE ONLY

Serial

		
	in amendment and name has changed, and indicate change	ge.)
Private Placement of Limited Partners	iip Interests	/320991
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐	Section 4(6) ULOE
Type of Filing: □ New Filing ☑	Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about	the issuer	
Name of Issuer (Check if this is an a	mendment and name has changed, and indicate change.)	
Portolan Pilot Fund, LP		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Portolan Capital Management, LLC	C, Two International Place, 26th Floor	(617) 753-6400
Boston, MA 02210		
Address of Principal Business Operations	Telephone Number (Including Area Code)	
(if different from Executive Offices)		
Brief Description of Business		1/9300-00-
To operate a private investment fund.		
Type of Business Organization		
□corporation	,	other (please specify):
□ business trust	☐ limited partnership, to be formed	
Actual or Estimated Date of Incorporation	1 2 0	Year 4 Actual □ Estimated
	ion: (Enter two-letter U.S. Postal Service abbreviation for	
sursalenon of meorporation of Organizat	CN for Canada; FN for other foreign jurisdiction)	D E
	2 101 Ominut, 111 to: Other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTIFICA	ATION DATA		
	suer, if the issuer h	g: has been organized within to o vote or dispose, or direct		, 10% or more of	a class of equity
 Each executive officer: 		porate issuers and of corpo	rate general and managing	g partners of part	nership issuers; and
• Each general and mana Check Box(es) that Apply:	ging partner of par ☑ Promoter	tnership issuers. ☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Portolan Capital Management,	LLC				
Business or Residence Address		per and Street, City, State, 2	Zip Code)		
The I to the Total Discovery) 1 D 4 3.6.4.	02110	. ,		
Two International Place, 26 th F Check Box(es) that Apply:	□ Promoter	□ Beneficial Owner	☐ Executive Officer	□ Director	☑ General and/or
Full Name (Last name first, if inc	lividual)				Managing Partner
•	iividuai)				
Portolan Investments, LLC Business or Residence Address	(Nivember	per and Street, City, State, 2	Zin Codo)		
			cip Code)		
Two International Place, 26th F	loor, Boston, MA,	, 02110			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)		 -		
Cliffdale Outside Managers LL	.c				
Business or Residence Address		per and Street, City, State, 2	Cip Code)		
80 Field Point Road, Suite 300,	Greenwich, CT. (06830			
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Full Name (Last name first, if inc	lividual)				Managing Partner
	ŕ				
Business or Residence Address	(Numb	per and Street, City, State, 2	Zip Code)		
00 Fini D. 1.4 D. 1.0 14. 200	,	•	,		
80 Field Point Road, Suite 300,	Greenwich, C1, C	96830			
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				<u> </u>
Hillside Capital Incorporated					
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
80 Field Point Road, Suite 300,	Greenwich, CT, (06830		···	
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
James T. Demetriades for the J	ames T. Demetria	des Family Trust dtd 3/1	5/96		
Business or Residence Address		per and Street, City, State, 2			
1499 Blueridge Dr., Beverly Hi	lls, CA, 90210				
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or
Full Name (Last name first, if inc	lividual)				Managing Partner
	•				
Business or Residence Address	(Numb	per and Street, City, State, 2	Zip Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORM	IATION A	BOUT OF	FERING								3.7	NT.
1. Has the issuer sold, or does the issuer intend to sell, to non accredited investors in this offering?							Yes	No ⊠				
			Ans	wer also in	Appendix,	Column 2,	if filing und	ier ULOE.				
2. What is th	e minimum	investment	that will b	e accepted	from any in	dividual?					\$2,000	,000*
ь	•										be wai Genera its sole	imum may ved by the al Partner in e discretion)
3. Does the c	offering ner	mit joint ow	mershin of	a single uni	it?						Yes ⊠	No
4. Enter the iremuneration agent of a bropersons to be Full Name (L	nformation for solicita ker or deal listed are a	requested f tion of pure er registered ssociated po	for each per chasers in co d with the S ersons of su	son who had connection v SEC and/or	as been or w vith sales of with a state	ill be paid securities or states, l	or given, di n the offeri st the name	rectly or inc ng. If a per of the brok	directly, any son to be li ter or deale	y commiss sted is an r. If more	associate than fiv	ed person or re (5)
N/A Business or R	esidence A	ddress (Nu	mber and S	treet City	State Zin C	ode)						
_ asiness of 1				, 0119,	- mie, Dip C							
Name of Asso	ociated Bro	ker or Deal	г									
States in Whi												
(Check ". [AL]	All States" [AK]	or check ind [AZ]	dividual Sta [AR]	ites) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	All Sta [HI]	
(AL)	[N]	[AZ] [IA]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	
Full Name (L	ast name fi	rst, if indivi	dual)									
Business or R	Lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc						All Sta	utec
•				,	[CO]					[GA]	الم ر [HI]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]] [PR]
Full Name (L				to the City	Santa 7:- 6							
Business or R	tesiaence A	aaress (Nu	mber and S	treet, City,	State, Zip C	.ode)						
Name of Asse	ociated Bro	ker or Deal	er		· • • · · · · · · · · · · · · · · · · ·							
States in Whi											7 A 11 C	
(Check "	All States" [AK]	or check in [AZ]	dividual Sta [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[[GA]	All Sta [HI]	
[JL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security	I already exchanged. Type of Security		Aggregate Offering Pric			Amount Already se Sold		
Debt		\$	0	\$		0		
Equity		\$	0	_ \$_		0		
	□ Common □ Preferred							
Convertible Securities (includin	g warrants)Series B Convertible Preferred Stock	\$ 20	00.000	000	\$61	274,985		
			0			0		
)		0			0		
		\$ 20	00,000,	000	\$61	,274,985		
	so in Appendix, Column 3, if filing under ULOE.							
offering and the aggregate dollar am the number of persons who have put	the number of accredited and non-accredited investors who have purchased securities in this g and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate on the of persons who have purchased securities and the aggregate dollar amount of their purchases total lines. Enter "0" if answer is "none" or "zero."		Number Investors			Aggregate Dollar Amoun of Purchases		
Accredited Investors			<u>3</u> 4	_	\$ <u>61</u>	<u>,274,985</u>		
Non-accredited Investors		_	0	_	\$	0		
Total (for filings under Ru	ale 504 only)		N/A		\$_ _	_N/A		
, =	so in Appendix, Column 4, if filing under ULOE.							
3. If this filing is for an offering under sold by the issuer, to date, in offerin	Rule 504 or 505, enter the information requested for all securities gs of the types indicated, the twelve (12) months prior offering. Classify securities by type listed in Part C - Question 1.							
Type of offering			ype of ecurity		Dol	lar Amoun Sold		
Rule 505			A_	_	\$ <u>_</u> }	301u N/A		
Regulation A		N	/A		<u>1_</u> 2	\/A		
Rule 504		N	/A		<u>\$_1</u>	N/A		
Total		N	/A		1_2	\/A		
securities in this offering. Excl The information may be given a	ses in connection with the issuance and distribution of the ude amounts relating solely to organization expenses of the issuer, as subject to future contingencies. If the amount of an expenditure te and check the box to the left of the estimate.							
Transfer Agent's Fees			,		\$	N/A		
Printing and Engraving Costs		· · • · · · · • · ·	••••		\$	N/A		
Legal Fees		•••••		⊠	\$	90,000		
Accounting Fees		· · · · · · · · · · · · · · · · · · ·	•••••		\$	N/A		
Engineering Fees					\$	N/A		
Sales Commissions (specify fin	ders' fees separately)				\$	N/A		
Other Expenses (identify)					\$	N/A		
Total				⋈	\$	90,000		

C. OFFERING FRICE	S, NUMBER OF HAVESTORS, EAFENSES AND USE	Or r	KUCEEDS			
I and total expenses furnished in respons	te offering price given in response to Part C - Question e to Part C - Question 4.a. This difference is the				\$ <u>61,184,985</u>	
used for each of the purposes shown. If the estimate and check the box to the left of the	ross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.					
, ,			Payments to Officers, Directors, & Affiliates		Payments To Others	
Salaries and fees			\$ <u>N/A</u>		\$_N/A	
Purchase of real estate			\$_N/A		\$ <u>N/A</u>	
Purchase, rental or leasing and installati	on of machinery and equipment		\$ <u>N/A</u>		\$_N/A	
Construction or leasing of plant building	gs and facilities	5	\$ <u>N/A</u>		\$_N/A	
offering that may be used in exchange f		_	© 31/A	_	e 21/4	
			\$ <u>N/A</u>		\$_N/A	
• •		_	\$ <u>N/A</u>		\$ <u>N/A</u>	
-			\$ <u>N/A</u>		\$_N/A	
Other (specify): To make investment			\$ <u>N/A</u>	Ø	61,184,985	
			\$_N/A		\$N/A	
Column Totals			\$ <u>N/A</u>	×	61,184,985	
Total Payments Listed (Column totals a	odded)		⊠ \$ <u>61</u>	.184	1,985	
following signature constitutes an undertaki	ned by the undersigned duly authorized person. If this noting by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragraph	ice is nge C	ommission, upo			
ssuer (Print or Type)	Signature		Date			
Portolan Pilot Fund, LP	By: Portolate Investments, LLC, its General Partner	September 15, 2005				
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
George McCabe	Manager					
	<u> </u>					

---- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)